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B6 Summary (Official Form 6 - Summary) (12/14)

# **United States Bankruptcy Court** Southern District of Ohio

Lori Jo McKean		Case No. <b>2:15-k</b>	0K-5U/64	
	Debtor	_,		
		Chapter	13	
	Lori Jo McKean		Debtor ,	Debtor ,

## SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	232,000.00		
B - Personal Property	Yes	4	33,943.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	3		171,061.42	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		740.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	8		18,892.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			3,651.00
J - Current Expenditures of Individual Debtor(s)	Yes	2			1,696.00
Total Number of Sheets of ALL Schedu	ıles	25			
	T	otal Assets	265,943.00		
			Total Liabilities	190,693.42	

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B 6 Summary (Official Form 6 - Summary) (12/14)

# United States Bankruptcy Court Southern District of Ohio

In re	Lori Jo McKean		Case No	2:15-bk-50764
_		Debtor,		
		Beeter	Chapter	13

# STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C.  $\S$  159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	740.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	740.00

#### State the following:

Average Income (from Schedule I, Line 12)	3,651.00
Average Expenses (from Schedule J, Line 22)	1,696.00
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	2,965.22

#### State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY"     column		111,742.42
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	740.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		18,892.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		130,634.42

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B6A (Official Form 6A) (12/07)

In re	Lori Jo McKean		Case No	2:15-bk-50764
-		Debtor,		

#### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
330 East Union Street Circleville, OH 43113	Fee simple	-	57,000.00	168,519.42
Debtor's Residence				
12990 Crownover Mill Road Mt. Sterling, OH, 43143	Tenant in Common	-	175,000.00	2,119.00

(Debtor owns undivided 1/3 interest as tenant-in-common with adult Son & Sister/Debtor has no actual possessory intrest in Property, which is maintained by Son, and occupied by her Son/Debtor has never received any income from Son per grantors' wishes)

Sub-Total > **232,000.00** (Total of this page)

Total > 232,000.00

10ta1 > 232,0

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B6B (Official Form 6B) (12/07)

	Case No. 2:15-bk-50764
Debtor	Dalaari,

### SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	Cash	-	30.00
2.	Checking, savings or other financial accounts, certificates of deposit, or	Checking Account (US Bank X0307) (Joint w/Son)	J	266.00
	shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit	Checking Account (HNB X0024)	-	0.00
	unions, brokerage houses, or cooperatives.	Health Savings Account thru Employer	-	45.00
		FLex Spending Account (through Employer) (Vision & Dental Coverage only)	-	1,062.00
		Savings Account (7402) Joint w/Son	-	20.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X		
4.	Household goods and furnishings, including audio, video, and computer equipment.	Misc. HHG & Furnishings	J	5,000.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X		
6.	Wearing apparel.	Misc. Wearing Apparel	-	350.00
7.	Furs and jewelry.	Misc. Jewelry/Earrings/Wedding Band	-	250.00
8.	Firearms and sports, photographic, and other hobby equipment.	x		
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	Life Insurance Policy (Term through Employer)(H=BF)	-	0.00
		(То	Sub-Tota stal of this page)	al > 7,023.00

<sup>3</sup> continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re	Lori Jo McKean	Case No. 2:15-bk-50764

Debtor

# SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
10.	Annuities. Itemize and name each issuer.	Х			
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing	SER	S	-	23,823.00
	plans. Give particulars.	Unve 62, w	ested Dupont Pension (Awaiting Distribution @ /hich is not within next 5 years)	-	1.00
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	2014	FTR (Received 2/19/15)	-	2,371.00
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
				Sub-Tota	al > 26,195.00

to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

In re	Lori Jo McKean	Case No. 2:15-bk-50764	

Debtor

# SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
<ol> <li>Patents, copyrights, and other intellectual property. Give particulars.</li> </ol>	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	OH CD	L (w/ Bus Driver Certification)	-	0.00
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and	1997 F	ord Escort (253K Miles) (Inoperable)	-	200.00
other vehicles and accessories.	1999 B (Inoper	uick Park Avenue (125K Miles) able)	-	500.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	Laptop	(5 yo)(Inoperable)	-	25.00
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	3 Dogs	, 3 Cats	-	0.00
32. Crops - growing or harvested. Give particulars.	X			
<ol> <li>Farming equipment and implements.</li> </ol>	X			
34. Farm supplies, chemicals, and feed.	Х			
			Sub-Tota	nl > <b>725.00</b>

Sheet **2** of **3** continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re	Lori Jo McKean	Case No. 2:15-bk-50764
_		Debtor ,
		SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
------------------	------------------	--------------------------------------	---	---

35. Other personal property of any kind Χ not already listed. Itemize.

> Sub-Total > 0.00 (Total of this page)

Total > 33,943.00

Sheet <u>3</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

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B6C (Official Form 6C) (4/13)

In re	Lori Jo McKean	Case No. 2:15-bk-50764
		<del>,</del>

Debtor

SCHEDULE C	- PROPERTY CLAIMED AS E	EXEMPT						
Debtor claims the exemptions to which debtor is entitled to (Check one box)  11 U.S.C. §522(b)(2)  11 U.S.C. §522(b)(3)	nder: Check if debtor claims a homestead exemption that exceeds \$155,675. (Amount subject to adjustment on 4/1/16, and every three years with respect to cases commenced on or after the date of adjustment on the date of adjustment of the date of the date of adjustment of the date of							
Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption					
Real Property 330 East Union Street Circleville, OH 43113	Ohio Rev. Code Ann. § 2329.66(A)(1)	132,900.00	57,000.00					
Debtor's Residence								
<u>Cash on Hand</u> Cash	Ohio Rev. Code Ann. § 2329.66(A)(3)	30.00	30.00					
Checking, Savings, or Other Financial Accounts, C Checking Account (US Bank X0307) (Joint w/Son)	Certificates of Deposit Ohio Rev. Code Ann. § 2329.66(A)(3)	133.00	266.00					
Health Savings Account thru Employer	Ohio Rev. Code Ann. § 2329.66(A)(3)	45.00	45.00					
FLex Spending Account (through Employer) (Vision & Dental Coverage only)	Ohio Rev. Code Ann. § 2329.66(A)(3) Ohio Rev. Code Ann. § 2329.66(A)(18)	242.00 820.00	1,062.00					
<u>Household Goods and Furnishings</u> Misc. HHG & Furnishings	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	5,000.00	5,000.00					
Wearing Apparel Misc. Wearing Apparel	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	350.00	350.00					
<u>Furs and Jewelry</u> Misc. Jewelry/Earrings/Wedding Band	Ohio Rev. Code Ann. § 2329.66(A)(4)(b)	250.00	250.00					
Interests in Insurance Policies Life Insurance Policy (Term through Employer)(H=BF)	Ohio Rev. Code Ann. §§ 2329.66(A)(6)(c), 3917.05	0.00	0.00					
Interests in IRA, ERISA, Keogh, or Other Pension of SERS	or Profit Sharing Plans Ohio Rev. Code Ann. §§ 3307.71, 3309.66	23,823.00	23,823.00					
Unvested Dupont Pension (Awaiting Distribution @ 62, which is not within next 5 years)	Ohio Rev. Code Ann. § 2329.66(A)(10)(b)	1.00	1.00					
Automobiles, Trucks, Trailers, and Other Vehicles 1999 Buick Park Avenue (125K Miles) (Inoperable)	Ohio Rev. Code Ann. § 2329.66(A)(2)	500.00	500.00					

164,094.00 Total: 88,327.00 Case 2:15-bk-50764 Doc 8 Filed 02/20/15 Entered 02/20/15 12:00:47 Desc Main Document Page 9 of 41

B6D (Official Form 6D) (12/07)

In re	Lori Jo McKean			Case No. 2:15-bk-50764
_			-,	
-		Debtor		

## SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H W J	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGEN	N - Q - D	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. xxx xx x0510			06/27/14	Ī	A T E D	Ī		
Brookhill Animal Clinic			Judgment Lien		Ы	$\dashv$		
615 US RT 22 East Circleville, OH 43113			330 East Union Street Circleville, OH 43113					
			Debtor's Residence					
			Value \$ 57,000.00				1,531.00	1,531.00
Account No. xxxx-x1330			2014					
Drummond Financial Services, LLC dba Loan Max 3653 S. High Street Columbus, OH 43207		-	Non-Purchase Money Security 1997 Ford Escort (253K Miles) (Inoperable)					
			Value \$ 200.00				423.00	223.00
Account No. xxxxxxxx4905			07/02/2007					
Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101-7346		-	Federal Tax Lien 330 East Union Street Circleville, OH 43113 Debtor's Residence					
			Value \$ 57,000.00				5,509.04	5,509.04
Account No. xxxxxxxxx1615			03/30/2010					
Internal Revenue Service			Federal Tax Lien					
P.O. Box 7346 Philadelphia, PA 19101-7346			330 East Union Street Circleville, OH 43113					
			Debtor's Residence					
			Value \$ 57,000.00				2,974.48	2,974.48
2 continuation sheets attached			(Total of	Subt		()	10,437.52	10,237.52

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 $B6D\ (Official\ Form\ 6D)\ (12/07)$  - Cont.

In re	Lori Jo McKean			Case No	2:15-bk-50764	
_		Debtor	,			

# SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS (Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C C E E T C	A W		EN, AND ID VALUE RTY	COZH-ZGEZ	DZLLQDLDA	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. xxxxxxxxx5476			10/15/2010		Ť	( H E D			
Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101-7346		-	Federal Tax Lien 330 East Union Street Circleville, OH 43113 Debtor's Residence Value \$	57,000.00		D		5,248.86	5,248.86
Account No. xxxxxxxxx5477			10/15/2010					·	
Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101-7346		_	Federal Tax Lien 330 East Union Street Circleville, OH 43113 Debtor's Residence Value \$	57,000.00				1,496.08	1,496.08
Account No. xxxxxxxxx6492			12/07/2010					·	
Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101-7346		-	Federal Tax Lien 330 East Union Street Circleville, OH 43113 Debtor's Residence Value \$	57,000.00				3,202.45	3,202.45
Account No. xxxxxxxxx6493			12/07/2010					·	
Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101-7346		-	Federal Tax Lien 330 East Union Street Circleville, OH 43113 Debtor's Residence Value \$	57,000.00	_			2,409.51	2,409.51
Account No. xxxxxxxxx9105			5/10/02						
Pennymac Loan Services 6101 Condor Drive Moorpark, CA 93021		-	First Mortgage 330 East Union Street Pmt: \$576./3.875% Arrears: \$10,000.(Debtor to dispute validity of not						
			Value \$	57,000.00				140,442.00	83,442.00
Sheet 1 of 2 continuation sheets Schedule of Creditors Holding Secured Cla		ed to	)	(Total of t	Subt his p			152,798.90	95,798.90

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 $B6D\ (Official\ Form\ 6D)\ (12/07)$  - Cont.

In re	Lori Jo McKean	 Case No	2:15-bk-50764	
_	Debtor			

# SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS (Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	J.	NATURE OF LIEN, AND DESCRIPTION AND VALUE	CONTINGEN	QULD	S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. xxx-x-xxx-xx-x30-01  Pickaway County Treasurer 207 South Court Street Circleville, OH 43113	x	-	2012-2014 R/E Taxes 12990 Crownover Mill Road Mt. Sterling, OH 43143 Inherited Property Value \$ 175,000.00		A T E D		2,119.00	0.00
Account No. xxxx xx 0005  Pickaway Manor Care 391 Clark Drive Circleville, OH 43113		_	12/10/2011 Judgment Lien 330 East Union Street Circleville, OH 43113 Debtor's Residence Value \$ 57,000.00				5,473.00	5,473.00
Account No. xxxx xx 0414  State of Ohio Department of Taxation c/o Attorney General 150 East Gay Street, 21st Floor Columbus, OH 43215		-	06/04/2008 Judgment Lien 330 East Union Street Circleville, OH 43113 Debtor's Residence					
Account No.			Value \$ 57,000.00				233.00	233.00
Account No.			Value \$  Value \$					
Sheet 2 of 2 continuation sheets atta Schedule of Creditors Holding Secured Claim		d t		Sub this			7,825.00	5,706.00
			(Report on Summary of S		Γota dule		171,061.42	111,742.42

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B6E (Official Form 6E) (4/13)

In re	Lori Jo McKean		Case No	2:15-bk-50764
		Debtor		

### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account he debtor has with the reditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H" "W" "I" or "C" in the column labeled "Husband, Wife, Joint or Community." If the claim is contingent place an "X" in the

lable on each claim by placing an "H," "W," J, or "C" in the column labeled "Husband, whe, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column lab "Disputed." (You may need to place an "X" in more than one of these three columns.)  Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.  Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.
☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
☐ Domestic support obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
☐ Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. $\$$ 507(a)(3).
☐ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen
Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals
Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
■ Taxes and certain other debts owed to governmental units
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
☐ Commitments to maintain the capital of an insured depository institution
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
☐ Claims for death or personal injury while debtor was intoxicated
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6E (Official Form 6E) (4/13) - Cont.

In re	Lori Jo McKean		Case No	2:15-bk-50764
_		Debtor		

### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts
Owed to Governmental Units

TYPE OF PRIORITY UNLIQUIDATED CODEBTOR Husband, Wife, Joint, or Community AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, ONTINGENT S P U T E D AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED **AMOUNT** INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY C J AND ACCOUNT NUMBER (See instructions.) Account No. xxx xxx1781 2012 Non-dischargeable Court Fines/Costs **Circleville Municpal Court** 0.00 **Clerk of Courts** 151 E. Franklin Street Circleville, OH 43113-1717 740.00 740.00 Account No. Account No. Account No. Account No. Subtotal 0.00 Sheet <u>1</u> of <u>1</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims (Total of this page) 740.00 740.00 Total 0.00 (Report on Summary of Schedules) 740.00 740.00

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B6F (Official Form 6F) (12/07)

In re	Lori Jo McKean		Case No	2:15-bk-50764
	Debtor	-,		

### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

OD FID VEG 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	10	ш	sband, Wife, Joint, or Community	П	$\overline{c}$	11	Ы	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J H H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLA IS SUBJECT TO SETOFF, SO STATE.	) IM	OOK-ZGEZH	071-00-D<	I S P U T E D	AMOUNT OF CLAIM
Account No. xxx-xxx-x66-1-5			2014-2015		T	DAHBD		
American Electric Power P.O. Box 24401 Canton, OH 44701-4401		-	Utility Bill	_		D		431.00
Account No. xxx4550	┪		2014					
Balanced Healthcare Receivables, LLC 164 Burke Street, Suite 201 Nashua, NH 03060		-	Medical Bill					127.00
Account No. McKean  CashNet USA 200 W. Jackson Blvd. Suite 2400 Chicago, IL 60606		-	2012 Pay Advance Loan					600.00
Account No. xxxxxxx0 011	╅		2014-2015					
Columbia Gas Bankruptcy Dept. 200 Civic Center Drive Columbus, OH 43215		-	Utility Bill					714.00
_7 continuation sheets attached	-		(То	Su tal of th		ota	- 1	1,872.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Lori Jo McKean			Case No	2:15-bk-50764	
_		Debtor	•/			

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	C	U	P	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J M H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONFINGENT	QU	S P U T E D	AMOUNT OF CLAIM
Account No. xxx6013			Opened 2/24/09	Ť	Ť		
Credit Adjustments Inc 330 Florence St Defiance, OH 43512		-	Collection Pickaway Medical Gro		D		340.00
Account No. xxx7043	t		Opened 5/12/11	+		H	
Credit Adjustments Inc 330 Florence St Defiance, OH 43512		-	Collection Berger Health System				306.00
Account No. xxx3540			Opened 1/28/09	+			
Credit Adjustments Inc 330 Florence St Defiance, OH 43512		-	Collection Pickaway Medical Gro				159.00
Account No. xxx0173			Opened 7/22/10	$\dagger$			
Credit Adjustments Inc 330 Florence St Defiance, OH 43512		-	Collection Berger Health System				66.00
Account No. xxx3568	T		Opened 10/14/10	$\dagger$		t	
Credit Adjustments Inc 330 Florence St Defiance, OH 43512		_	Collection Pickaway Health Serv				64.00
Sheet no1 _ of _7 _ sheets attached to Schedule of			,	Subt	tota	ıl	025.00
Creditors Holding Unsecured Nonpriority Claims			(Total of	his	pag	ge)	935.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Lori Jo McKean		Case No	2:15-bk-50764
_		Debtor		

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community		C	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A H	DATE CLAIM WAS INCURRED AN CONSIDERATION FOR CLAIM. IF CLA IS SUBJECT TO SETOFF, SO STATI	ID AIM E.	OZH_ZGEZ	OZI_QO_D∢FE	I S P U T E D	AMOUNT OF CLAIM
Account No. xxx2425			Opened 3/25/10		Т	T		
Credit Adjustments Inc 330 Florence St Defiance, OH 43512		-	Collection Berger Health System			D		63.00
Account No. xxx8784	+		Opened 7/15/10 Collection Berger Health System					63.00
Credit Adjustments Inc 330 Florence St Defiance, OH 43512		_						
								58.00
Account No. xxx9567  Credit Adjustments Inc 330 Florence St Defiance, OH 43512		-	Opened 4/12/10 Collection Pickaway Medical Gro					55.00
Account No. xxx9056	╁		Opened 10/28/10					00.00
Credit Adjustments Inc 330 Florence St Defiance, OH 43512		-	Collection Berger Health System					
Account No. xxx9572	+		Opened 3/11/10					28.00
Credit Adjustments Inc 330 Florence St Defiance, OH 43512		-	Collection Berger Health System					_
								4.00
Sheet no. <b>_2</b> of <b>_7</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims	•		T)	Su otal of thi		ota pag		208.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Lori Jo McKean		Case I	No	2:15-bk-50764	
_		Debtor				

CREDITOR'S NAME,	Ç	Hu	sband, Wife, Joint, or Community		į	Į [	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAI IS SUBJECT TO SETOFF, SO STATE.	1   N		N I SPUTED	AMOUNT OF CLAI
Account No. xxxx3226			Opened 6/22/14	Т	T		
Credit Management Lp 4200 International Pkwy Carrollton, TX 75007		-	Collection Tw Mid Ohio Division				62.00
Account No. <b>xxx4550</b>	╀	$\vdash$	2014		+	+	02.00
Emergency Services, Inc. 8 Oak Park Drive Bedford, MA 01730		-	Medical Bill				71.00
Account No. xxx0462	┢		2013		+	+	+
EOS CCA 300 Canal View Blvd., Suite 130 Rochester, NY 14623		-	Frontier Collection				823.00
Account No. xxxxx4725	┢		Opened 3/04/11		+	$\dagger$	
Gc Services 6330 Gulfton Houston, TX 77081		-	Collection 11 Sprint				382.00
Account No. xxx3006	$\vdash$		2014	-+	+	+	332.00
Halsted Financial Services, LLC P.O. Box 828 Skokie, IL 60076	-	-	Collection for American Web Loan				2,056.00
Sheet no. <b>3</b> of <b>7</b> sheets attached to Schedule of		_		Sub	otot	tal	200101
Creditors Holding Unsecured Nonpriority Claims			(Total	l of this	pa	ige)	3,394.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Lori Jo McKean		Case I	No	2:15-bk-50764	
_		Debtor				

					—	_	1
CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	C	U N L	P	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONT_NGENT	LQULD	P U T E	AMOUNT OF CLAIM
Account No. xx6405			2014	] ⊤	A T E D		
Jeffrey H. Jordan, Esq. P.O. Box 30863 Columbus, OH 43230		-	Collection for Sterling Joint Ambulance		D		835.00
Account No.			2012	П			
Liquid Cash Online		-	Unsecured Loan				
							635.00
Account No. McKean  Margulis, Gussler & Hall 126 South Court Street		-	2014 Legal Representation Fee				
Circleville, OH 43113							3,250.00
Account No. xxxxxxxxx4292			2014				
Mount Carmel East 6001 East Broad Street Patient Accounts Columbus, OH 43213		-	Medical Bill				1,152.00
Account No. xxx-x5768	t	$\vdash$	2014	T	H	T	
Mount Carmel Medical Group P.O. Box 951464 Cleveland, OH 44193		-	Medical Bill				80.00
Sheet no4 of _7 sheets attached to Schedule of				Subt	tota	.1	E 0E2 00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	5,952.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Lori Jo McKean		Case I	No	2:15-bk-50764	
_		Debtor				

22 22 20 20 20 20 20 20 20 20 20 20 20 2	С	Hu	sband, Wife, Joint, or Community	Тс	Ιυ	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	ODE BT OR	H W H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONFLEGEN	LQU	I S P U T	AMOUNT OF CLAIM
Account No. xxxx9253			2013	٦т	T E D		
National Credit Adjusters P.O. Box 3023 327 W. 4th Street Hutchinson, KS 67504-3023		-	Collection for IdealGelt				145.00
Account No. xxxxx2236	╁		2014	+			
National Recovery Agency 2491 Paxton Street Harrisburg, PA 17111		-	Collection for Express Scripts				25.00
Account No. xxx7003			2014	+			
Ohio Bureau of Workers' Compensation 30 W. Spring Street Columbus, OH 43215-2256		-	Collection				267.00
Account No. xxxxx6539	┪		2014	+			
OptumRX P.O. Box 9040 Carlsbad, CA 92018-9040		-	Medical Bill				65.00
Account No. xxx9023	lacksquare		2012	+	+	$\vdash$	33.00
Pay Day One P.O. Box 101842 Fort Worth, TX 76185		-	Pay Advance Loan				1,253.00
Sheet no. <b>5</b> of <b>7</b> sheets attached to Schedule of	_	_		Sub	tota	ıl	4 755 00
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	1,755.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Lori Jo McKean		Case No	2:15-bk-50764	
_		,			
		Debtor			

	Ιc	ш	shand Wife Joint or Community	Ic	Τυ	D	<u> </u>
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	L Q U	I S P U T	AMOUNT OF CLAIM
Account No. xxxx9279			Opened 9/12/14	Т	E		
Pcb 5500 New Albany Rd New Albany, OH 43054		-	Collection Circleville Municipa		D		740.00
Account No. xxx8891	╀		Opened 4/08/10	-	+	╀	1 10100
Pcb 5500 New Albany Rd New Albany, OH 43054		-	Collection Med1 Riverside Radio				
							207.00
Account No. xxx8890  PCB P.O. Box 29917 Columbus, OH 43229-7517		-	Opened 4/08/10 Collection				400.00
	┡		2014	_		_	130.00
Account No. xxxxxx2177  Radiology Incorporated 10567 Sawmill Pkwy, Suite 100 Powell, OH 43065-6671		-	2014 Medical Bill				363.00
Account No. <b>x5649</b>	╀		2009	+	+	+	
Rumpke 10795 Hughes Road Cincinnati, OH 45251		_	Refuse Collection				40.00
Sheet no. <b>6</b> of <b>7</b> sheets attached to Schedule of				Sub	tota	ı al	
Creditors Holding Unsecured Nonpriority Claims			(Total of				1,480.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Lori Jo McKean		Case No.	2:15-bk-50764	
_		Debtor			

		_			_	_	_,	
CREDITOR'S NAME,	CO	Hu	sband, Wife, Joint, or Community	CONTI	UNL	1	D	
MAILING ADDRESS	D	н	DATE OF A DAMAG DAGGED AND	N	ΙĽ		s	
INCLUDING ZIP CODE,	E B T O	w	DATE CLAIM WAS INCURRED AND	I	Ι'n	H	P	
AND ACCOUNT NUMBER	ĮŤ	J	CONSIDERATION FOR CLAIM. IF CLAIM			<u>.</u> 1	ŤΙ	AMOUNT OF CLAIM
(See instructions above.)	R	С	IS SUBJECT TO SETOFF, SO STATE.	G	l b		E   D	
A (N. 1995242)	╁	┝	2014	N G E N T	D A T E		ŀ	
Account No. xx5342			2014 Medical Bill	1	Ė			
			Medical Bill	$\vdash$	۲	+	$\dashv$	
Scioto Paint Valley MHC							-	
4449 State Route 159		-					-	
Chillicothe, OH 45601							-	
								140.00
				Ш,				140.00
Account No. xxxxx-xx8736			2009		П	Τ	П	
	1		Collection for Dental Faculty					
Transworld Systems, Inc.			_				-	
4000 East 5th Avenue		l_						
							-	
Columbus, OH 43219								
								140.00
Account Noxxxxxxxxxxx0307	╅	H	Opened 9/09/11	+	╁	$^{+}$	$\dashv$	
Account NoAAAAAAAAAAAOJO7	ł		Check Credit Or Line Of Credit					
l.,, .			Check Great Of Line Of Great					
Us Bank Hogan Loc	l.,						-	
Po Box 5227	X	-						
Cincinnati, OH 45201								
								3,016.00
	╂			+	╁	+	$\dashv$	
Account No.								
				┸		┸	Ц	
Account No.								
	1							
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	L	L		$\perp$	$\perp$		$\rfloor$	
Sheet no7 of _7 sheets attached to Schedule of				Sub	tota	al	T	
Creditors Holding Unsecured Nonpriority Claims			(Total of t				7	3,296.00
Creditors froming Onsecured Nonpriority Claims			(Total of t				- t	
					Γot		- 1	40.000.55
			(Report on Summary of So	che	dul	es]	) [	18,892.00

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B6G (Official Form 6G) (12/07)

In re	Lori Jo McKean		Case No	2:15-bk-50764	
_		Debtor			

### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. Case 2:15-bk-50764 Doc 8 Filed 02/20/15 Entered 02/20/15 12:00:47 Desc Main Document Page 23 of 41

B6H (Official Form 6H) (12/07)

In re	Lori Jo McKean		Case No	2:15-bk-50764	
_		Debtor	,		

#### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

#### NAME AND ADDRESS OF CODEBTOR

Debra L. McKean 1290 Brownleaf Road Columbus, OH 43223

Marcus McKean 12990 Crownover Mill Road Mount Sterling, OH 43143

Marcus McKean 12990 Crownover Mill Road Mount Sterling, OH 43143

#### NAME AND ADDRESS OF CREDITOR

Pickaway County Treasurer 207 South Court Street Circleville, OH 43113

Us Bank Hogan Loc Po Box 5227 Cincinnati, OH 45201

Pickaway County Treasurer 207 South Court Street Circleville, OH 43113

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Debtor 1	E:II	in this information to identify your	2000		•
Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the: SOUTHERN DISTRICT OF OHIO  Case number (If known)  Official Form B 6I Schedule I: Your Income  12/13  Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are separated and your spouse. If you are separated and your spouse is living with you, include information about your spouse. If you are separated and your spouse, or some spouse is living with you, include information about your spouse. If you are separated and your spouse is not filling with you, do not include information about your spouse. If you are separated and your spouse is not live information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question  Part 1:  Describe Employment  I. Fill in your employment information.  If you have more than one job, attach a separate page with information about additional employers.  Occupation  Debtor 1  Debtor 2  Debtor 2, hoth are equally responsible for supplying correct information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question  Part 1:  Debtor 1  Debtor 2 or non-filing spouse  Employed  Not employed  Not employed  Not employed  Not employed  Teas Valley Board of Education  Employer's name  Employer's name  Employer's name  Employer's address  385 Viking Way  Ashville, OH 43103					•
United States Bankruptcy Court for the:  Case number (If known)    Check if this is:	Dei	Lori Jo Mch	<u>Kean</u>		
Case number 2:15-bk-50764  Check if this is: An amended filing A supplement showing post-petition chapter 13 income as of the following date:  MM/DD/YYYY  Schedule I: Your Income  12/13  Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question  Part 1:  Describe Employment  1. Fill in your employment information.  If you have more than one job, attach a separate page with information about additional employers.  Debtor 1  Debtor 2 or non-filing spouse  Employed Not employed  Teas Valley Board of Education  Employer's name Employer's address  385 Viking Way Ashville, OH 43103	_				
Official Form B 6I  Schedule I: Your Income  Be as complete and accurate as possible. If two married people are filling jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filling jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filling with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question  Part 1:  Describe Employment  1. Fill in your employment information.  If you have more than one job, attach a separate page with information about additional employers.  Occupation  Debtor 1  Debtor 2 or non-filling spouse  Employed  Not emp	Uni	ted States Bankruptcy Court for the	e: SOUTHERN DISTRIC	CT OF OHIO	
Official Form B 6I  Schedule I: Your Income  Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question  Part 1:  Describe Employment  1. Fill in your employment information.  If you have more than one job, attach a separate page with information about additional employers.  Include part-time, seasonal, or self-employed work.  Occupation  Debtor 1  Debtor 2 or non-filling spouse  Employed  Not employed  Not employed  Not employed  Not employed  Not employed  Teas Valley Board of Education  Employer's name  Employer's name  Employer's address  St Viking Way Ashville, OH 43103	Cas	se number 2:15-bk-50764			Check if this is:
Official Form B 6I  Schedule I: Your Income  Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question  Part 1:  Describe Employment  1. Fill in your employment information.  If you have more than one job, attach a separate page with information about additional employers.  Include part-time, seasonal, or self-employed work.  Occupation B 12/11:  Debtor 1 Debtor 2 or non-filing spouse  Employed Debtor 1 Debtor 2 or non-filing spouse  Employed Not employed Not employed Not employed Not employed  Not employed  Teas Valley Board of Education  Employer's name  Employer's address  Stylking Way Ashville, OH 43103	(If kr	nown)			☐ An amended filing
Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question  Part 1:  Describe Employment  1. Fill in your employment information.  If you have more than one job, attach a separate page with information about additional employers.  Include part-time, seasonal, or self-employed work.  Occupation may include student or homemaker, if it applies.  Employer's name  Employer's address  Stiking Way Ashville, OH 43103					
Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question  Part 1:  Describe Employment  1. Fill in your employment information.  If you have more than one job, attach a separate page with information about additional employers.  Include part-time, seasonal, or self-employed work.  Occupation  Occupation  Employer's name  Occupation may include student or homemaker, if it applies.  Employer's address  385 Viking Way Ashville, OH 43103	0	fficial Form B 6I			MM / DD/ YYYY
Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question  Part 1:  Describe Employment  1. Fill in your employment information.  If you have more than one job, attach a separate page with information about additional employers.  Include part-time, seasonal, or self-employed work.  Occupation  Occupation  Employer's name  Occupation may include student or homemaker, if it applies.  Employer's address  385 Viking Way Ashville, OH 43103	S	chedule I: Your Inc	ome		12/13
If you have more than one job, attach a separate page with information about additional employers.  Include part-time, seasonal, or self-employed work.  Occupation may include student or homemaker, if it applies.  Employment status  Not employed  Not employed  Not employed  Not employed  Teas Valley Board of Education  Employer's name  Employer's address  385 Viking Way Ashville, OH 43103	Par	Describe Employment  Fill in your employment			
attach a separate page with information about additional employers.  Include part-time, seasonal, or self-employed work.  Occupation may include student or homemaker, if it applies.  Employment status  Not employed  Bus Driver  Teas Valley Board of Education  Employer's name  Employer's address  385 Viking Way Ashville, OH 43103		information.			_
information about additional employers.  Occupation  Include part-time, seasonal, or self-employed work.  Occupation may include student or homemaker, if it applies.  Occupation about additional Employed  Bus Driver  Teas Valley Board of Education  Employer's name  Sass Viking Way Ashville, OH 43103			Employment status	■ Employed	_ ' '
Include part-time, seasonal, or self-employed work.  Occupation may include student or homemaker, if it applies.  Employer's name  Employer's address  Sass Viking Way Ashville, OH 43103		, , ,		☐ Not employed	■ Not employed
Self-employed work.  Employer's name Occupation may include student or homemaker, if it applies.  Employer's address Employer's address  Self-employed work.  Employer's name  Employer's address  Ashville, OH 43103		employers.	Occupation	Due Deiver	
or homemaker, if it applies.  Employer's address  385 Viking Way  Ashville, OH 43103			•	Bus Driver	
How long employed there? 12 Years		Scii-Ciripioyed Work.	Employer's name	Teas Valley Board of	
		Occupation may include student		Teas Valley Board of Education  385 Viking Way	

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 0.00 2. 2,357.00 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. +\$ 3. 0.00 0.00 Calculate gross Income. Add line 2 + line 3. 2,357.00 0.00

Official Form B 6I Schedule I: Your Income page 1

Deb	otor 1	Lori Jo McKean	_	Case	number (if known)	2:15-bk	-50764	
	Cop	by line 4 here	4.	For	2,357.00		otor 2 or ng spouse 0.00	
5.	l iet	all payroll deductions:		_	,			
5.	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions. Specify: FSA	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.+		0=:00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00 0.00 0.00	
6	A ala	HSA		\$_	92.00	\$	0.00	
6. 7.		If the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  Culate total monthly take-home pay. Subtract line 6 from line 4.	6. 7.	\$ <u>-</u> \$	893.00	\$ \$	0.00	
8.		all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  Interest and dividends  Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation  Social Security  Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  Pension or retirement income  Other monthly income. Specify:	8a. 8b. 8c. 8d. 8e.	\$ \$   \$   \$   \$   \$   \$   \$   \$   \$   \$	0.00 0.00 0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$ \$ + \$	0.00 0.00 0.00 0.00 1,771.00 0.00 416.00 0.00	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	2,187.00	
10.		culate monthly income. Add line 7 + line 9. I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		1,464.00 + \$	2,187.	.00 = \$	3,651.00
11.	Inclu othe Do r	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not scify:	depen		•	ed in <i>Sche</i>	edule J. 11. +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certallies				a. if it	Combin	
13.		you expect an increase or decrease within the year after you file this form		-:-! ^		h aless:	•	income
		Yes. Explain: None Anticipated. CMI & Di differ slightly as Del	otor pa	aid 3	x in one montl	n during t	inat period	

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						1		
Fill ir	n this informa	ition to identify ye	our case:					
Debto	or 1	Lori Jo McK	ean			Che	eck if this is:	
					_		An amended filing	
Debto	or 2 use, if filing)						A supplement shown 13 expenses as of	wing post-petition chapter
(Зрос	use, ii iiiiig <i>)</i>						13 expenses as of	the following date.
Unite	d States Bankı	ruptcy Court for the	: SOUTH	IERN DISTRICT OF OHIO	<u> </u>		MM / DD / YYYY	
		15-bk-50764					A separate filing fo 2 maintains a sepa	r Debtor 2 because Debtor
(If kno	own)						z mainams a sepa	arate nousenoid
Off	ficial Fo	rm B 6J						
		J: Your	_ Exper	nses				12/1:
infor	rmation. If m		eded, atta	. If two married people ar ch another sheet to this n.				
Part		ribe Your House	ehold					
1.	Is this a joir							
	■ No. Go to		in a separ	ate household?				
	ΠN		•					
		-	st file a sep	parate Schedule J.				
2.	Do you hav	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents'	names.						☐ Yes
								□ No
								☐ Yes
								□ No
					-			☐ Yes
								□ No □ Yes
3.	Do vour ext	oenses include	_	N				□ Yes
	expenses o	f people other t	than $_{f \Box}$	No				
	yourself an	d your depende	nts? ⊔	Yes				
Part	2: Estim	ate Your Ongoi	ing Month!	ly Expenses				
				uptcy filing date unless y y is filed. If this is a supp				
appl	icable date.							
				government assistance i				
	cial Form 6I						Your exp	enses
		or home owners and any rent for th		ses for your residence. I or lot.	nclude first mortgage	e 4.	\$	0.00
	If not include	led in line 4:						
	4a. Real	estate taxes				4a.	\$	0.00
	4b. Prope	rty, homeowner'	s, or renter	's insurance		4b.	\$	0.00
			•	ipkeep expenses		4c.		50.00
_		owner's associa				4d.	\$	0.00
5	Additional i	mortgage navm	ents for vo	our residence, such as ho	me equity loans	5	\$	0.00

Debtor 1 Lori Jo N	lcKean	Case number (if known)	2:15-bk-50764
6. Utilities:			
	heat, natural gas	6a. \$	245.00
•	ver, garbage collection	6b. \$	65.00
	, cell phone, Internet, satellite, and cable services	6c. \$	
•		·	50.00
		6d. \$	0.00
	keeping supplies	7. \$	400.00
	hildren's education costs	8. \$	0.00
Clothing, laundr	y, and dry cleaning	9. \$	20.00
<ol><li>Personal care p</li></ol>	roducts and services	10. \$	15.00
<ol> <li>Medical and der</li> </ol>	ntal expenses	11. \$	300.00
2. Transportation.	Include gas, maintenance, bus or train fare.		202.22
Do not include ca	1 /	12. \$	200.00
	clubs, recreation, newspapers, magazines, and books	13. \$	0.00
<ol> <li>Charitable contr</li> </ol>	ibutions and religious donations	14. \$	0.00
5. Insurance.			<del>-</del>
	surance deducted from your pay or included in lines 4 or 20.		
15a. Life insura		15a. \$	0.00
15b. Health insu	urance	15b. \$	0.00
15c. Vehicle ins	surance	15c. \$	65.00
15d. Other insu	rance. Specify: Insurance held from Husband SSD	15d. \$	172.00
	clude taxes deducted from your pay or included in lines 4 or 20.		
Specify: Taxes	held from Husband SSD	16. \$	112.00
Specify: Taxes	held from Husband Pension	\$	2.00
7. Installment or le	ase payments:		
17a. Car payme	ents for Vehicle 1	17a. \$	0.00
17b. Car payme	ents for Vehicle 2	17b. \$	0.00
17c. Other. Spe	cify:	17c. \$	0.00
17d. Other. Spe		17d. \$	0.00
	of alimony, maintenance, and support that you did not report a	s .	
	our pay on line 5, Schedule I, Your Income (Official Form 6I).	18. \$	0.00
	you make to support others who do not live with you.	\$	0.00
Specify:		19.	
0. Other real prope	erty expenses not included in lines 4 or 5 of this form or on Sch	nedule I: Your Income.	
20a. Mortgages	on other property	20a. \$	0.00
20b. Real estate	etaxes	20b. \$	0.00
20c. Property, h	omeowner's, or renter's insurance	20c. \$	0.00
20d. Maintenan	ce, repair, and upkeep expenses	20d. \$	0.00
	er's association or condominium dues	20e. \$	0.00
<ol> <li>Other: Specify:</li> </ol>	3. 5 document of condominating dates	21. +\$	0.00
. Other opcony.			0.00
2. Your monthly ex	rpenses. Add lines 4 through 21.	22. \$	1,696.00
The result is your	monthly expenses.		
	nonthly net income.		
	2 (your combined monthly income) from Schedule I.	23a. \$	3,651.00
23b. Copy your	monthly expenses from line 22 above.	23b\$	1,696.00
23c. Subtract vo	our monthly expenses from your monthly income.		
	is your monthly net income.	23c. \$	1,955.00
For example, do yo modification to the t	in increase or decrease in your expenses within the year after you expect to finish paying for your car loan within the year or do you expect yourms of your mortgage?		rease or decrease because of a
■ No.			
☐ Yes.	None Anticipated. Debtor drives vehicle owned by NFS	S.	
Explain:			

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B6 Declaration (Official Form 6 - Declaration). (12/07)

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# **United States Bankruptcy Court** Southern District of Ohio

In re	Lori Jo McKean			2:15-bk-50764
		Debtor(s)	Chapter	13

### DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

	I declare under penalty of persheets, and that they are true and corre		ad the foregoing summary and schedules, consisting of y knowledge, information, and belief.	27
Date	February 20, 2015	Signature	/s/ Lori Jo McKean Lori Jo McKean Debtor	

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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B7 (Official Form 7) (04/13)

### United States Bankruptcy Court Southern District of Ohio

In re	Lori Jo McKean			2:15-bk-50764
		Debtor(s)	Chapter	13

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

#### 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$3,305.33 2015 YTD: Debtor Teas Valley Board of Education \$26,460.00 2014: Debtor Teas Valley Board of Education \$21,315.00 2013: Debtor Teas Valley Board of Education

#### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$3,541.80 2015 YTD: Husband Social Security Disability

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AMOUNT SOURCE

\$836.00 2015 YTD: Husband Pension/Annuity \$5,016.00 2014: Husband Pension/Annuity

\$20,891.00 2014: Husband Social Security Disability

\$5,016.00 2013: Husband Pension/Annuity

\$20.579.00 2013: Husband Social Security Disability

#### 3. Payments to creditors

None

#### Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS
OF CREDITOR
DATES OF
PAYMENTS
AMOUNT PAID
OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT
DATES OF PAID OR
PAYMENTS/ VALUE OF AMOUNT STILL
NAME AND ADDRESS OF CREDITOR TRANSFERS TRANSFERS OWING

None

c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

OWING

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT
AND CASE NUMBER
PROCEEDING
Pennymac/Christiana Trust v. Lori Jo McKean, et. al.

NATURE OF
PROCEEDING
PROCEEDING
Civil
Pickaway County Court of Common
Pleas

COURT OR AGENCY
AND LOCATION
DISPOSITION
Pickaway County Court of Common
Pleas

Case No.: 2014 CI 0161

Brookhill Animal Clinic v. McKean Civil Collection Pickaway County Municipal Judgment for Creditor/Staye

Cr d

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B7 (Official Form 7) (04/13)

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None b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

#### 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

#### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF PROPERTY

CASE TITLE & NOWINGER

#### 7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR. IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

#### 8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

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#### 9. Payments related to debt counseling or bankruptcy

None 

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE **Spiroff Law Office** 

DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR 02/2015

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

1180 S. High Street Columbus, OH 43206

112 Goliad Street, Suite D Fort Worth, TX 76126

02/2015 \$40.

#### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR Marcus McKean 12990 Crownover Mill Road Mount Sterling, OH 43143

DATE AND VALUE RECEIVED 1989 Ford Ranger, -0-/Inherited from 04/2014

Father/Transfered title from Debtor and Son to

1983 Chevy El Camino -0-/Transferred Title from

\$2,000.

Son only/Vehicle is Inoperable

**Debtor and Son to Son Only** 

DESCRIBE PROPERTY TRANSFERRED

Son

**Marcus McKean** 12990 Crownover Road Mount Sterling, OH 43143

Son

Marcus McKean 04/2014 12990 Crownover Mill Road

Mount Sterling, OH 43143 Son

04/2014

1970 International TRT (Truck) -0-/Transferred Title from Debtor and Son to Son Only/Son purchased when a Minor/Inoperable/Son may try

to Repair

None b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

#### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

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#### 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

#### 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

#### 14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

#### 15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF NOTICE ENVIRONMENTAL LAW

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lone b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF NOTICE ENVIRONMENTAL

OTICE LAW

None

e c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

#### 18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO.

NAME
Top Hat Driving

Top Hat Driving 16-1633994 School, LTD

(ITIN)/ COMPLETE EIN ADDRESS

330 East Union Street Circleville, OH 43113

NATURE OF BUSINESS

This is LLC/Driving

School/2 Employees/No Income since 2012 when doors closed/Federal Tax Liability stems from this failed business/No actual waged owed to former employees/No Income since 2012/Debtor in process of formally dissolving

LLC w/ Ohio SOS.

BEGINNING AND ENDING DATES

2002-2012

None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

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·	19. Books, records and financia	al statements			
None	a. List all bookkeepers and accountants who within <b>two years</b> immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.				
Debtor	AND ADDRESS		DATES SERVICES RENDERED All times Relevant		
	ille, OH 43113				
None		no within the <b>two years</b> immediately preceding the red a financial statement of the debtor.	e filing of this bankruptcy case have audited the books		
NAME	AI	DDRESS	DATES SERVICES RENDERED		
None		no at the time of the commencement of this case we of account and records are not available, explain.	ere in possession of the books of account and records		
NAME		ADDRESS			
None		reditors and other parties, including mercantile an wears immediately preceding the commencement	d trade agencies, to whom a financial statement was of this case.		
NAME A	AND ADDRESS	DA	TE ISSUED		
	20. Inventories				
None	a. List the dates of the last two in and the dollar amount and basis of		person who supervised the taking of each inventory,		
DATE O	F INVENTORY IN	VENTORY SUPERVISOR	DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)		
None	b. List the name and address of the	he person having possession of the records of each	of the inventories reported in a., above.		
DATE O	F INVENTORY	NAME AND ADDRES RECORDS <b>N/A</b>	SES OF CUSTODIAN OF INVENTORY		
	21 . Current Partners, Officers	, Directors and Shareholders			
None	a. If the debtor is a partnership, l	ist the nature and percentage of partnership interes	et of each member of the partnership.		
NAME A	AND ADDRESS	NATURE OF INTEREST	PERCENTAGE OF INTEREST		
None	b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.				
Debtor	AND ADDRESS	TITLE Sole Shareholder/President	NATURE AND PERCENTAGE OF STOCK OWNERSHIP 100 Shares COmmon No Par Stock - 100%		

Circleville, OH 43113

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B7 (Offici	al Form 7) (04/13)					
8	22 . Former partners, officers, o	lirectors and shareholders				
None	a. If the debtor is a partnership, has each member who withdrew from the partnership within the year miniculatery preceding the					
NAME	NAME ADDRESS DATE OF WITH					
None	b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within <b>one year</b> immediately preceding the commencement of this case.					
NAME A	AND ADDRESS	TITLE	DATE OF TERMINATION			
	23 . Withdrawals from a partne	ership or distributions by a corporation				
None			ons credited or given to an insider, including compensation ther perquisite during <b>one year</b> immediately preceding the			
OF REC	& ADDRESS IPIENT, IONSHIP TO DEBTOR	DATE AND PURPOSE OF WITHDRAWAL	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY			
	24. Tax Consolidation Group.					
None	If the debtor is a corporation, list		on number of the parent corporation of any consolidated within <b>six years</b> immediately preceding the commencement			
NAME	OF PARENT CORPORATION		TAXPAYER IDENTIFICATION NUMBER (EIN)			
	25. Pension Funds.					
None			cation number of any pension fund to which the debtor, as an s immediately preceding the commencement of the case.			
NAME	OF PENSION FUND		TAXPAYER IDENTIFICATION NUMBER (EIN)			
		****				
	DECLARATION	N UNDER PENALTY OF PERJUR	Y BY INDIVIDUAL DEBTOR			
	under penalty of perjury that I have hey are true and correct.	read the answers contained in the foregoin	g statement of financial affairs and any attachments thereto			
Date F	February 20, 2015	Signature /s/ Lori Jo	McKean			

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

Debtor

Lori Jo McKean

Fill in this information to identify your case:					
Debtor 1	Lori Jo McKean				
Debtor 2 (Spouse, if filing					
United States Ba	ankruptcy Court for the: Southern District of Ohio				
Case number (if known)	2:15-bk-50764				

Check as directed in lines 17 and 21:					
According to the calculations required by this Statement:					
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).				
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).				
	3. The commitment period is 3 years.				
	4. The commitment period is 5 years.				

☐ Check if this is an amended filing

# Official Form 22C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

12/14

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
  - ☐ Not married. Fill out Column A, lines 2-11.
  - Married. Fill out both Columns A and B. lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

you have nothing to report for any line, write \$0 in the space.		
	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
<ol><li>Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).</li></ol>	\$ 2,547.22	\$0.00
<ol> <li>Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.</li> </ol>	\$	\$0.00
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.		\$
5. Net income from operating a business, profession, or farm		
Gross receipts (before all deductions) \$ 0.00  Ordinary and necessary operating expenses -\$ 0.00		
Net monthly income from a business, profession, or farm \$ 0.00 Copy here ->	>\$ 0.00	\$ 0.00
6. Net income from rental and other real property Gross receipts (before all deductions)  Ordinary and necessary operating expenses  \$ 0.00		
Net monthly income from rental or other real property \$ 0.00 Copy here ->	>\$	\$

Official Form 22C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Debtor 1	Lori Jo McKean		Case number	(if known)	2:15-bk-	50764	
			Column A Debtor 1		Column E Debtor 2 non-filing	or	
7. <b>I</b> n	terest, dividends, and royalties		\$	0.00	\$	0.00	
8. <b>U</b>	nemployment compensation		\$	0.00	\$	0.00	
	o not enter the amount if you contend that the amount received was a ben e Social Security Act. Instead, list it here:	efit under					
		0.00					
	For your spouse \$	0.00					
be	ension or retirement income. Do not include any amount received that we nefit under the Social Security Act.		\$	0.00	\$	418.00	
De re de	come from all other sources not listed above. Specify the source and a onot include any benefits received under the Social Security Act or payme ceived as a victim of a war crime, a crime against humanity, or internation omestic terrorism. If necessary, list other sources on a separate page and tal on line 10c.	ents al or					
	10a.		\$	0.00	\$	0.00	
	10b.		\$	0.00	\$	0.00	
	10c. Total amounts from separate pages, if any.	+	\$	0.00	\$	0.00	
	alculate your total average monthly income. Add lines 2 through 10 for ach column. Then add the total for Column A to the total for Column B.	\$	2,547.22	+ -	418.00	= \$	2,965.22
				J			al average
Part 2:	Determine How to Measure Your Deductions from Income						,
	opy your total average monthly income from line 11. alculate the marital adjustment. Check one:  You are not married. Fill in 0 on line 3d.					\$	2,965.22
	You are married and your spouse is filing with you. Fill in 0 in line 13d.						
	You are married and your spouse is not filing with you.						
	Fill in the amount of the income listed in line 11, Column B, that was No dependents, such as payment of the spouse's tax liability or the spouse						
	In lines 13a-c, specify the basis for excluding this income and the amount adjustments on a separate page.	unt of inco	me devoted	to each p	urpose. If ne	ecessary, I	ist additional
	If this adjustment does not apply, enter 0 on line 13d.						
	13a	_ \$		_			
	13b	_ \$		_			
	13c	_ +\$					
	13d. Total	\$	0.00	O Cor	oy here=> 13	3d	0.00
14. <b>`</b>	Your current monthly income. Subtract line 13d from line 12.				1	4. \$ <u> </u>	2,965.22
15.	Calculate your current monthly income for the year. Follow these step	s:					
•	15a. Copy line 14 here=>				15	ia. \$	2,965.22
	Multiply line 15a by 12 (the number of months in a year).					х	12
,	15b. The result is your current monthly income for the year for this part of	f the form.			15	5b. \$	35,582.64

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Debto	or 1	Lori	Jo McKean		Case number (if known)	2:15-bk-5076	64
16.	Calc	culate	the median family income that applies to y	ou. Follow these steps:			
	16a.	Fill in	the state in which you live.	ОН			
	16b.	Fill in	the number of people in your household.	2			
	16c.		the median family income for your state and s			16c. \$	53,551.00
			d a list of applicable median income amounts, ctions for this form. This list may also be avail				
17.	How	do t	e lines compare?				
	17a.		Line 15b is less than or equal to line 16c. Of 11 U.S.C. § 1325(b)(3). <b>Go to Part 3.</b> Do No		•		not determined under
	17b.		Line 15b is more than line 16c. On the top of 1325(b)(3). <b>Go to Part 3 and fill out Calcu</b> current monthly income from line 14 above.	lation of Disposable In			
Part	3:	Ca	culate Your Commitment Period Under 11	U.S.C. §1325(b)(4)			
18.	Сор	y you	total average monthly income from line 11	1		18. \$	2,965.22
19.	cont	end th	e marital adjustment if it applies. If you are at calculating the commitment period under 1° acome, copy the amount from line 13d.			ur	
	•		al adjustment does not apply, fill in 0 on line 1	9a.		19a. <b>-</b> \$	0.00
	Sub	tract	ine 19a from line 18.			19b. \$	2,965.22
20.	Calc	culate	your current monthly income for the year.	Follow these steps:		<u>L</u>	
			line 19b			20a. \$	2,965.22
		Multi	oly by 12 (the number of months in a year).				<b>x</b> 12
	20b.	The	esult is your current monthly income for the ye	ear for this part of the fo	rm	20b. \$	35,582.64
						L	
	20c.	Copy	the median family income for your state and s	size of household from I	ine 16c	1	53,551.00
			,,,,,,				
	21.	How	do the lines compare?				
			Line 20b is less than line 20c. Unless otherwis period is 3 years. Go to Part 4.	se ordered by the court,	on the top of page 1 of this fo	orm, check box 3	3, The commitment
			Line 20b is more than or equal to line 20c. Unlocommitment period is 5 years. Go to Part 4.	ess otherwise ordered	by the court, on the top of pag	ge 1 of this form,	, check box 4, The
Part	4:	Sig	n Below			_	
	By s		here, under penalty of perjury I declare that the	ne information on this st	atement and in any attachme	nts is true and c	correct.
Х	/s/	Lori	Jo McKean				
			McKean of Debtor 1				
	_		ruary 20, 2015				
		MM	/DD /YYYY				
	-		ked 17a, do NOT fill out or file Form 22C-2. ked 17b, fill out Form 22C-2 and file it with thi	s form. On line 39 of the	at form, copy your current mo	nthly income fro	m line 14 above.

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Debtor 1 Lori Jo McKean Case number (if known) 2:15-bk-50764

## **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 08/01/2014 to 01/31/2015.

### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Teas Valley School District

Income by Month:

6 Months Ago:	08/2014	\$2,275.50
5 Months Ago:	09/2014	\$2,739.38
4 Months Ago:	10/2014	\$2,418.61
3 Months Ago:	11/2014	\$3,563.26
2 Months Ago:	12/2014	\$2,065.79
Last Month:	01/2015	\$2,220.77
	Average per month:	\$2,547.22

Official Form 22C-1

Debtor 1 Lori Jo McKean Case number (if known) 2:15-bk-50764

# **Current Monthly Income Details for the Debtor's Spouse**

### **Spouse Income Details:**

Income for the Period 08/01/2014 to 01/31/2015.

# Line 9 - Pension and retirement income

Source of Income: **Husband Pension** 

Income by Month:

6 Months Ago:	08/2014	\$418.00
5 Months Ago:	09/2014	\$418.00
4 Months Ago:	10/2014	\$418.00
3 Months Ago:	11/2014	\$418.00
2 Months Ago:	12/2014	\$418.00
Last Month:	01/2015	\$418.00
	Average per month:	\$418.00

### Non-CMI - Social Security Act Income

Source of Income: Husband SSD

Income by Month:

6 Months Ago:	08/2014	\$1,740.90
5 Months Ago:	09/2014	\$1,740.90
4 Months Ago:	10/2014	\$1,740.90
3 Months Ago:	11/2014	\$1,740.90
2 Months Ago:	12/2014	\$1,740.90
Last Month:	01/2015	\$1,770.90
	Average per month:	\$1,745.90